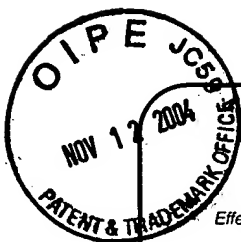


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) YAO-4340US
Application Number 09/787,480		Filed June 11, 2001
For HEAD SUPPORT MECHANISM, INFORMATION RECORDING/REPRODUCING APPARATUS, AND METHOD OF MANUFACTURING HEAD SUPPORT MECHANISM		
Art Unit 2652		Examiner Allen T. Cao
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55 \$_____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430	\$215 \$_____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980	\$490 <u>\$980.00</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1530	\$765 \$_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2080	\$1040 \$_____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-0350. I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor.		11/12/2004 STEUMEL1 00000068 09787480 01 FC:1253 980.00 OP
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number: <u>27,424</u> .		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"> _____ Signature Daniel N. Calder _____ Typed or Printed Name</div><div style="width: 40%; text-align: right;"><u>11/9/04</u> _____ Date 610/407-0700 _____ Telephone Number</div></div>		
CERTIFICATE OF MAILING OR TRANSMISSION		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.		
Name (Print/Type)	Lorraine C. Fox	
Signature		Date
		November 09, 2004
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input type="checkbox"/> Total of _____ forms are submitted.		



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (10-04v2) (AW 10/2004)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2005		Complete if Known		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/787,480	
		Filing Date	June 11, 2001	
		First Named Inventor	Kazuo Yokoyama	
		Examiner Name	Allen T. Cao	
		Art Unit	2652	
TOTAL AMOUNT OF PAYMENT	(\$)	980	Attorney Docket No.	YAO-4340US

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES					
<input checked="" type="checkbox"/> Deposit Account (use as backup only):		Large Entity Small Entity					
Deposit Account Number: 18-0350		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Deposit Account Name: RatnerPrestia		1051	130	2051	65	Surcharge - late filing fee or oath	
The Director is authorized to: (check all that apply)		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
<input type="checkbox"/> Charge fee(s) indicated below		1053	130	1053	130	Non-English specification	
<input checked="" type="checkbox"/> Credit any overpayments		1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION		1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE		1252	430	2252	215	Extension for reply within second month	
Large Entity	Small Entity	1253	980	2253	490	Extension for reply within third month	980
Fee Code	Fee (\$)	1254	1,530	2254	765	Extension for reply within fourth month	
1001	790	2001	395	2255	1,040	Extension for reply within fifth month	
1002	350	2002	175	2401	170	Notice of Appeal	
1003	550	2003	275	2402	170	Filing a brief in support of an appeal	
1004	790	2004	395	2403	150	Request for oral hearing	
1005	160	2005	80	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1)		1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1453	1,370	2453	685	Petition to revive - unintentional	
Total Claims	-20**	1501	1,370	2501	685	Utility issue fee (or reissue)	
Independent Claims	-3**	1502	490	2502	245	Design issue fee	
Multiple Dependent		1503	660	2503	330	Plant issue fee	
Large Entity	Small Entity	1460	130	1460	130	Petitions to the Commissioner	
Fee Code	Fee (\$)	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1202	18	2202	9	1806	180	Submission of Information Disclosure Stmt	
1201	88	2201	44	8021	40	Recording each patent assignment per property (times number of properties)	
1203	300	2203	150	1809	790	Filing a submission after final rejection (37 CFR § 1.129(a))	
1204	88	2204	44	1810	790	For each additional invention to be examined (37 CFR § 1.129(b))	
1205	18	2205	9	1801	790	Request for Continued Examination (RCE)	
SUBTOTAL (2)		1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)							
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3)		(\$)		980	

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Daniel N. Calder	Registration No. Attorney/Agent)	27,424	Telephone	610/407-0700
Signature	<i>Daniel N. Calder</i>	Date	November 9, 2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.